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PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875										
7-	21.05	CLAIMS AS	FILED -	PARTI		SMALL EI	NTITY	OR	OTHER (S)MALL	
							1,1,0			
DACI	FOR	NUMBE	NUMBER FILED NUMBER			RATE	FEE	(	<del>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>	ME .
BASIC FEE (37 CFR 1.16(a))				07	S	OR	50	5		
TOTAL CLAIMS (37 CFR 1.16(c))		24	24 minus 2/=		. 3,			OR	. s <u>OU</u> =	150-
	PENDENT CLAIM FR 1.16(b))	15 4	4 minus 8 = . 9			100=		OR	x 200= -	-0-
<u> </u>		UT CLAIM PRESEN	т (3	7 CFR 1.16(d))	+ 5 180		OR	+360	-0-	
157									150	
* If th	e difference in c	olumn 1 is less tha	n zero, en	ter "0" in column 2	2	TOTAL [	<u> </u>		TOTAL	
· CLAIMS AS AMENDED - PART II									/	
	(Column 1) (Column 2) (Co				(Column 3)	SMALL E	NTITY	OR		R THAN ENTITY- :
		CLAIMS	1	HIGHEST	PRESENT	RATE	ADDI-		: RATE	ADDI
AMENDMENT A		REMAINING AFTER		NUMBER PREVIOUSLY	EXTRA	RATE	TIONAL-	:	. 10012	TIONAL FEE
	Total	AMENDMENT	Minus	PAID FOR	=	25	FEE		50	TEL.
Ω	(37 CFR 1.15(c))		Minus	•••	=	× 9222 =		OR	2W)	
JE J	Independent (37 CFR 1.16(b))		IVIIIIUS			x s <u>/00</u> =		OR:	× 200=	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))					+ s[ <u>80</u> =		OR.	+360=	<u> </u>
	*					TOTAL ADD'L FEE		OR.	TOTAL ADD'L FEE	
		(0-1, 1)		(Column 2)	(Column 3)	·		- :		
AMENDMENT B		(Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	•	= .	× 25 =		OR	× s <u>50</u> =	
	Independent	· -	Minus		=	× 100 =		OR	× 200	
N N	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))					101		OR*	3/00	
L~	FIRST PRESEN	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 C	+ s/00 = TOTAL		-	TOTAL		
1		-				ADD'L FEE		OR	ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)	, <u></u>		, :		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	:	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus		=	x s <u>215</u> =		OR:	=× 5 <u>50</u> =	
	Independent (37 CFR 1.16(b))	<del> </del>	Minus		=	x =100 =		OR	× 200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))					+ s/60=		OR	+ 360=	
	<del> </del>	<del></del>				TOTAL ADD'L FEE		OR	ADD'L FEE	
	• If the entry in	column 1 is less th	nan the en	try in column 2, w	rite "0" in colum	n 3.			r ir titti ent	ia in tamuno 1 is i-

• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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